

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Society of Anesthesiologists Political Action Committee

Full Name (Last, First, Middle Initial)

**A. David J. Wildt M.D.**

Mailing Address 3021 Berkshire

City	State	Zip Code
Cleveland Hts	OH	44118-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cleveland Clinic FoundationOccupation  
Resident

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3110479

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**B. Anne O. Wilhite M.D.**

Mailing Address 10136 Cherokee Rd

City	State	Zip Code
Richmond	VA	23235-1106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McGuire VAOccupation  
anesthesiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2015

Transaction ID : C3178745

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Danny L. Wilkerson M.D.**Mailing Address 4301 W Markham St # 515  
Anesthesiology Department

City	State	Zip Code
Little Rock	AR	72205-7101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of ArkansasOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2015

Transaction ID : C3178912

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1333.34